



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
 INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE	2. FUNCTION OF REPORT (CHECK ONE) <input checked="" type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY
----------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------

3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S)
 Carpenters Regional Council N161013

4. MAILING ADDRESS
 ADDRESS: 1401 Hampton Ave
 CITY / STATE / ZIP: St Louis, MO 63139

5. TELEPHONE NUMBER
 314-644-4800

6. TYPE OF ELECTION (CHECK ONE)
☒ PRIMARY ☐ GENERAL ☐ SPECIAL ☐ CAUCUS

7. DATE OF ELECTION
 11-1-16

8. TYPE OF REPORT (CHECK ONE)
☒ INITIAL REPORT ☐ REPORT WITHIN 14 DAYS OF ELECTION ☐ ADDITIONAL REPORT ☐ OTHER

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE SUPP OPP	SCHEDULE OF EXPENDITURES 12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
Anne Zerr	Senate	✓	GPS Impact 100 E. Grand Ave Des Moines, IA 50309	Member to member mailing	7-20-16	2904.56
John Rizzo	Senate	✓	GPS Impact 100 E. Grand Ave Des Moines, IA 50309	Member to member mailing	7-20-16	1000.22
Kevin Corlew	MO State Rep	✓	GPS Impact 100 E. Grand Ave Des Moines, IA 50309	Member to member mailing	7-20-16	237.20
Shiela Solon	MO State Rep	✓	GPS Impact 100 E. Grand Ave Des Moines, IA 50309	Member to member mailing	7-20-16	491.60
Chrissy Sommer	MO State Rep	✓	GPS Impact 100 E. Grand Ave Des Moines, IA 50309	Member to member mailing	7-20-16	835.04
Shane Roden	MO State Rep	✓	GPS Impact 100 E. Grand Ave Des Moines, IA 50309	Member to member mailing	7-20-16	1206.24
Jeff Schwentker	MO State Rep	✓	GPS Impact 100 E. Grand Ave Des Moines, IA 50309	Member to member mailing	7-20-16	815.96

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15) \$ 7,490.82

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. _____

SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT DATE 8-23-16



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
 INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE	2. FUNCTION OF REPORT (CHECK ONE) <input checked="" type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY
----------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------

3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S)
 Carpenters Regional Council

4. MAILING ADDRESS ADDRESS: 1401 Hampton Ave CITY / STATE / ZIP: St Louis, MO 63139	5. TELEPHONE NUMBER 314-644-4800
-------------------------------------------------------------------------------------------	-------------------------------------

6. TYPE OF ELECTION (CHECK ONE) <input checked="" type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL <input type="checkbox"/> CAUCUS	7. DATE OF ELECTION 11-1-16
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------

8. TYPE OF REPORT (CHECK ONE)
☒ INITIAL REPORT ☐ REPORT WITHIN 14 DAYS OF ELECTION ☒ ADDITIONAL REPORT ☐ OTHER

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE SUPP OPP	SCHEDULE OF EXPENDITURES 12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
Anne Zerr	Senate	✓	Carpenters Dist Council 1401 Hampton St Louis MO 63139	Mailing done by the CDC postage	7-12-16	390.34
John Rizzo	Senate	✓	Carpenters Dist Council 1401 Hampton St Louis MO 63139	Mailing done by the CDC postage	7-12-16	106.99
Nick King	MO State Rep	✓	Carpenters Dist Council 1401 Hampton St Louis MO 63139	Mailing done by the CDC postage	7-12-16	68.28
Bill Kidd	MO State Rep	✓	Carpenters Dist Council 1401 Hampton St Louis MO 63139	Mailing done by the CDC postage	7-12-16	30.67
Kevin Corlew	MO State Rep	✓	Carpenters Dist Council 1401 Hampton St Louis MO 63139	Mailing done by the CDC postage	7-12-16	19.87
Chrissy Sommer	MO State Rep	✓	Carpenters Dist Council 1401 Hampton St Louis MO 63139	Mailing done by the CDC postage	7-12-16	70.44
Jeff Schwentker	MO State Rep	✓	Carpenters Dist Council 1401 Hampton St Louis MO 63139	Mailing done by the CDC postage	7-12-16	68.85
Shane Roden	MO State Rep	✓	Carpenters Dist Council 1401 Hampton St Louis MO 63139	Mailing done by the CDC postage	7-12-16	151.62

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15)	\$	907.06
-----------------------------------------------	----	--------

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE	M.E.C. ID NO.
SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT 	DATE 9-23-16



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE	2. FUNCTION OF REPORT (CHECK ONE) <input checked="" type="checkbox"/> INDEPENDENT EXPENDITURE STATEMENT (S-1) OR <input type="checkbox"/> INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY
----------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------

3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S)
Carpenters Regional Council

4. MAILING ADDRESS ADDRESS: 1401 Hampton Ave CITY / STATE / ZIP: St Louis, MO 63139	5. TELEPHONE NUMBER 314-644-4800
-------------------------------------------------------------------------------------------	-------------------------------------

6. TYPE OF ELECTION (CHECK ONE) <input checked="" type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIAL <input type="checkbox"/> CAUCUS	7. DATE OF ELECTION 11-1-16
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------

8. TYPE OF REPORT (CHECK ONE)
☐ INITIAL REPORT ☐ REPORT WITHIN 14 DAYS OF ELECTION ☒ ADDITIONAL REPORT ☐ OTHER

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE SUPP OPP	SCHEDULE OF EXPENDITURES 12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
Lee Smith	MO State Rep	✓	Carpenters Dist Council 1401 Hampton St Louis, MO 63139	Mailing done by the CDC postage	7-12-16	32.79

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15)	\$	32.79
-----------------------------------------------	----	-------

17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE M.E.C. ID NO. _____

SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT <i>Charles W. Walker</i>	DATE 8-23-16
--------------------------------------------------------------------------------------------------	-----------------